

KY-FD-48
(2/96)

REQUEST FOR BACKHAUL AUTHORIZATION

TO: Processing Specialist
Kentucky Department of Agriculture
Division of Food Distribution
100 Fair Oaks Lane, Suite 502
Frankfort, KY 40601

FROM: R/A: _____
Address: _____
City: _____ State: _____ Zip Code: _____

Request is hereby made to allow backhauling _____ pounds of _____, USDA Donated Commodity to the below listed processor. Processor may only charge the price for the end product that is listed on an End Product Data Schedule on file with the Division of Food Distribution prior to this request. Processor agrees that he will not inflate the cost of the end product in any way, and that only his usual and customary fees for delivery of the end product will be charged to the recipient agency.

ALL PARTIES, BY THEIR SIGNATURES BELOW, AGREE TO THE TERMS AS STATED ABOVE.

For Processor -
Name of Company _____

SIGNATURE: _____ TITLE: _____ DATE: _____

FOR R/A
SIGNATURE: _____ TITLE: _____ DATE: _____

NOTE: This request is to be signed in triplicate by the processor and the Recipient Agency and sent to the Division of Food Distribution. The Division of Food Distribution will approve and then sign and return a copy to each of the other two parties.

FOR STATE OF KENTUCKY , DIVISION OF FOOD DISTRIBUTION:

SIGNATURE: _____ TITLE: _____ DATE: _____